

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACD-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

API NO. 15- 095-21754-000 ORIGINAL

County Kingman

C W2 NW SE Sec. 20 Twp. 29S Rge. 7W

Operator: License # 6236 **CONFIDENTIAL** 1980 Feet from (S)N (circle one) Line of Section

Name: MTM Petroleum, Inc. **CONFIDENTIAL** 310 Feet from (E)W (circle one) Line of Section

Address PO Box 82 Footages Calculated from Nearest Outside Section Corner: (SE) NE, (SE), NW or SW (circle one) **KCC**

City/State/Zip Spivey KS 67142 Lease Name Mayer Well # 1

Purchaser: Oil-Cooperative Refining Gas-Ks Gas Supply Field Name Settle **CONFIDENTIAL**

Operator Contact Person: Marvin A. Miller Producing Formation Mississippian

Phone (316) 532-3794 Elevation: Ground 1562' KB 1567'

Contractor: Name: Shawnee Well Service Total Depth 4541' PBDT _____

License: 30346 Amount of Surface Pipe Set and Cemented at 256KB Feet

Wellsite Geologist: 223-00 Multiple Stage Cementing Collar Used? _____ Yes _____ No

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD SLOW Temp. Aband
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:
Operator: MTM Petroleum, Inc.
Well Name: Mayer #1
Comp. Date 8-7-99 Old Total Depth 4541'

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBDT
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

11-30-99 12-3-99
Spud Date 1-1-99 Date Reached TD _____ Completion Date _____
County Kingman Docket No. D-27,434

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature [Signature]
Title Marvin A. Miller, President Date 2-22-2000

Subscribed and sworn to before me this 22nd day of February,
2000
Notary Public Kathy Hill
Date Commission Expires 01-04-2003

KATHY HILL
Notary Public - State of Kansas
My Appt. Expires 01-04-2003

K.C.C. OFFICE USE ONLY Attach to 0216
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)

SIDE TWO

Operator Name MEM Petroleum, Inc.

Lease Name Mayer

Well # 1

Sec. 20 Twp. 29S Rge. 7W
 East
 West

County Kingman

IDENTIFIED

INSTRUCTIONS: Show important tops and base of formations penetrated. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken Yes No
(Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy.)

List All E.Logs Run:

Log Formation (Top), Depth and Datum Sample
Name Top Datum

CASING RECORD

New Used

Report all strings set-conductor, surface, intermediate, production, etc.

Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth
2 DP jspf	4" HEC 4188 - 4193	1500 Gal 15% CSA Acid Job
	5 1/2" Bolt Bridge Plug @ 4270	

TUBING RECORD	Size 2 3/8"	Set At 4200'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Inj. 12-3-99	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil 1 Bbls.	Gas 10 Mcf	Water 10 Bbls.	Gas-Oil Ratio 10:1	Gravity
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Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACD-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Coningled. Other (Specify) _____

Production Interval: _____